Support Center Services

<u>Definition:</u> Non-medical care, supervision and assistance provided in a non-institutional, group setting outside of the participant's home to people who because of their disability are unable to care for and supervise themselves. Services provided are necessary to prevent institutionalization and maintain the participants' health and safety. The care, supervision and assistance will be provided in accordance with a plan of care. An array of non-habilitative activities and opportunities for socialization will be offered throughout the day but not as therapeutic goals.

Transportation will be provided from the participant's residence to the habilitation site when the service start time is before 12:00 Noon. Transportation will be available from the participant's habilitation site to their residence when the service start time is after 12:00 Noon. The cost for transportation is included in the rate paid to the provider.

<u>Providers:</u> Support Center Services will only be provided by DSN Boards or companies/agencies qualified by SCDDSN to provide Day Services. Services will only be provided in or originate from facilities licensed by SCDDSN.

Contact your supervisor for your board's policy/procedure for <u>enrollment</u> in Adult Activity Centers (AAC) operated by your agency

Arranging for the Service: When you determine a recipient needs Support Center Services they should be given a choice of providers of this service and the offering of choice must be documented. The recipient and/or his/her family/guardian should be provided with a listing of enrolled providers. If there is only one available choice then this must be explained to the recipient and/or his/her legal guardian and documented.

Prior to adding Support Center to the Waiver Tracking System, you must first ensure the service is included on the STS. If Support Center is not already on the STS you cannot add it to the Waiver Tracking System. In addition, the funding for day services must be updated prior to adding it to the budget. To make this change proceed to the services menu on the STS (SVMEN). Select CHGAT and enter SSN in Key 1 position. The day service that the individual is receiving will be displayed along with the activity type and how it is currently being funded. Enter the effective date (which is the enrollment date/budget begin date) and change the funding to Waiver ("W").

Once you have ensured that the information is entered correctly onto the STS you may proceed with adding the service to the Waiver Tracking System. Once the request is approved, Support Center Services can be authorized using the **Authorization for Services (MR/RD Form SUP-06)**. The **MR/RD Form SUP-06** authorizes the day program to bill the local DSN Board provider for services rendered.

For Support Center, one unit equals one-half day as indicated by the individual's presence or absence as noted on the AAC roll book.

<u>Monitoring the Services:</u> You must monitor the effectiveness, frequency, duration, benefits, and usefulness of the service along with the recipient's/family's satisfaction with the service. Information gathered during monitoring may lead to a change in the service, such as an increase/decrease in units authorized, change of provider, change to a more appropriate service, etc. The following criteria should be followed when monitoring Support Center Services:

- At least monthly for the first two months
- At least quarterly thereafter
- Start over with each new provider or location

This monitoring will be considered complete when **one or more** of the following has been conducted:

- Review of documentation of services provided for the purpose of assessing the effectiveness, frequency, duration, benefits, and usefulness of the service (i.e. review of progress)
- Conversation/discussion with the recipient, recipient's family/caregiver, or Day staff member for the purpose of determining the effectiveness, frequency, duration, benefits, and usefulness of the service.
- Conversation with the service provider about the effectiveness, frequency, duration, benefits, and usefulness of the service.
- On-site observation of the service being rendered for the purpose of determining the effectiveness, frequency, duration, benefits, and usefulness of the service.

Monitorship of this service may occur during contact with the individual/family or the provider of services. It may also occur during review of written documentation such as daily logs of objectives and/or formal professional assessments. Some items to consider during monitorship include:

- → Is the individual satisfied with his/her daily activity?
- → Is the individual satisfied with the provider of his/her service?
- → Is the service area clean and safe?
- → What is the individual's attendance?
- → What are the opportunities for choice given to the individual?
- → Does the individual feel comfortable with staff?

Reduction, Suspension, or Termination of Services: If services are to be reduced, suspended, or terminated, a <u>written</u> notice must be forwarded to the consumer or his/her legal guardian including the details regarding the change(s) in service, allowance for appeal/reconsideration, and a ten (10) calendar day waiting period before proceeding with the reduction, suspension, or termination of the waiver service(s). The general termination form that has been used in the past for all waiver services is no longer used. See **Chapter 9** for specific details and procedures regarding written notification and the appeals process.

.

S. C. DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS *MR/RD WAIVER*

AUTHORIZATION FOR SERVICES TO BE <u>BILLED TO DSN BOARD</u>

:			
	Recipient's Name	/	Date of Birth
Address			
Medicaid #	<u> </u>	1 1 1	
			e(s) to the person named above. On
		Please note: Ti	his nullifies any previous authoriza
is provider for		Please note: Ti	his nullifies any previous authoriza
is provider for Suppor	this service(s).		his nullifies any previous authorization in the second sec
is provider for Support Number	this service(s). t Center:	(one un	it = 1/2 day or 2-3 hours)
is provider for Support Number	this service(s). t Center: r of Units per Week:	(one un	it = 1/2 day or 2-3 hours)
is provider for Support Number	this service(s). t Center: r of Units per Week:	(one un	it = 1/2 day or 2-3 hours)
is provider for Support Number	this service(s). t Center: r of Units per Week:	(one un	it = 1/2 day or 2-3 hours)

